

Docket No.

ICC Office Use Only

STATE OF ILLINOIS
ILLINOIS COMMERCE COMMISSION

ORIGINAL

Application of :
Comm South Companies, Inc. for a :
Certificate of Authority to Provide :
Facilities-Based Local Exchange and :
Resold Interexchange Telecommunications :
Services in the State of Illinois :

00-0680

APPLICATION FOR CERTIFICATE OF AUTHORITY
TO PROVIDE TELECOMMUNICATIONS SERVICES

GENERAL

1. Applicant's Name (including d/b/a, if any)

FEIN # 75-2587984

Comm South Companies, Inc.

Address: Street 2909 N. Buckner Boulevard, Suite 800

City Dallas

State/Zip TX 75228

2. Authority Requested: (Mark all that apply) ☐ 13-403 Facilities Based Interexchange

☒ 13-404 Resale of Local and/or Interexchange

☒ 13-405 Facilities Based Local

Please see Attachment A, appended hereto.

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.

☒ Part 710 Uniform System of Accounts for Telecommunications Carriers

X Part 735 Procedures Governing the Establishment of Credit, Billing, Deposits, Termination of Service and Issuance of Telephone Directories for Local Exchange Telecommunications Carriers in the State of Illinois **(Interexchange Services Only)**

X Section 735.180 Directories

 Other:

Please see Attachment B, appended hereto.

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:
- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
 - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
 - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
 - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.

Please see Attachment C, appended hereto, for responses to (a), (b) and (c). Applicant is already authorized to provide prepaid local exchange service and thus the questions in Appendix D are not applicable.

5. In what area of the state does the Applicant propose to provide service?

Applicant seeks authority to provide resold interexchange and facilities-based local exchange service throughout the State of Illinois.

Applicant currently holds a Certificate of Service authority to provide resold local exchange services within the State of Illinois and in the geographic areas served by Illinois Bell Telephone Company d/b/a Ameritech Illinois, GTE North Incorporated, GTE South Incorporated, and Central Telephone Company of Illinois. See Order, 97-0574 (January 7, 1998) at 4.

6. Please attach a sheet designating contact persons to work with Staff on the following:
- a) issues related to processing this application
 - b) consumer issues
 - c) customer complaint resolution

- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

Please see Attachment D, appended hereto.

7. Please check type of organization?

☐ Individual
☐ Partnership
☒ Corporation
☐ Other (Specify)

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

Please see Attachment E, appended hereto.

9. List jurisdictions in which Applicant is offering service(s).

Please see Attachment F, appended hereto.

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

☒ (Please provide details) ☐ NO

Please see Attachment G, appended hereto.

11. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

☐ YES ☒ NO

If YES, describe fully. _____

12. Has Applicant provided service under any other name?

☒ YES ☐ NO

If YES, please list.

Please see Attachment E and F, appended hereto.

13. Will the Applicant keep its books and records in Illinois? ____ YES X NO
If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

Applicant requests permission pursuant to Section 250.10 to maintain its books and records in its main office at 2909 N. Buckner Boulevard, Suite 800, Dallas, Texas, 75228. Because Applicant's financial and accounting offices are located at its headquarters in Dallas, Texas, maintaining a duplicate set of accounts in Illinois would be unduly burdensome. In accordance with Part 705 of the Illinois Administrative Code, Applicant will make records readily identifiable and available to the Commission upon request.

MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

Please see Attachment H, appended hereto.

15. List officers of Applicant.

Please see Attachment I, appended hereto.

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? X YES ____ NO

If YES, list entity. F.J. Pollak, an officer and director of Applicant, currently holds 4.1 percent of Topp Telecom, Inc. ("Topp"). Topp is a leading provider of prepaid wireless services in the United States. Topp was incorporated in 1996 and currently operates as a cellular reseller in all 50 states, the District of Columbia, Puerto Rico and the U.S. Virgin Islands, providing local cellular numbers to customers at any location in the United States with cellular coverage.

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

Applicant's billing complies with the provisions of 83 Ill. Admin. Code § 735.70. Applicant bills its customers directly on a monthly basis. The billing statement includes the Company's name, address, and two toll-free telephone numbers: one for automated account information (1-800-988-9955) and another for the Company's billing and customer service departments (1-800-936-5223). The Company's billing statement clearly identifies the total due, outstanding previous balance (if any), and four dates:

the billing date, the due date, the date after which payments are deemed late, and the date after which the account is subject to termination. The statement itemizes charges for the Company's local service, optional services provided, and taxes, surcharges, and fees. At such time as the Company begins providing long distance services for which it assumes billing and collection responsibility, the customer's bill will include the itemization detailed in 83 Ill. Admin. Code § 735.70(b)(G).

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

Applicant will resolve promptly all service, billing, and repair complaints from customers. Customers with complaints or billing inquiries may contact Applicant's authorized customer service center toll-free at 1-800-936-5223. Alternatively, customers may write to Applicant at the address listed in 6.b above. Applicant commits to resolving all customer disputes and outages in a reasonable, timely manner, and to complying with the rules set forth in 83 Ill. Admin. Code §735.190 for addressing customer complaints.

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? X YES NO

20. What telephone number(s) would a customer use to contact your company?

Customers may contact the Company toll free by dialing 1-800-936-5223. This number is printed on each customer bill. Customers also may access automated account information by dialing 1-800-988-9955.

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

 X YES NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

To ensure that its customers have affirmatively selected the Company or any additional services, Applicant will not switch a new customer's long distance carrier or provide additional telecommunications services until it has received a Letter of Authorization from the new customer in accordance with Section 13-902 of the Illinois Public Utilities Act and Section 64.1100 of Rules of the Federal Communications Commission, 47 C.F.R. §64.1100.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?

X, unless specifically waived YES _____ NO (If no, please provide an explanation.)

Please see Attachment B, appended hereto.

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

X YES _____ NO

FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

Please see Attachment J, appended hereto.

TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities? _____ YES X NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

If NO, which facility provider(s)'s services does the Applicant intend to use?

Please see Attachment A, appended hereto.

27. Please describe the nature of service to be provided (e.g., operator services, Internet, debit cards, long distance service, data services, local service, prepaid local service).

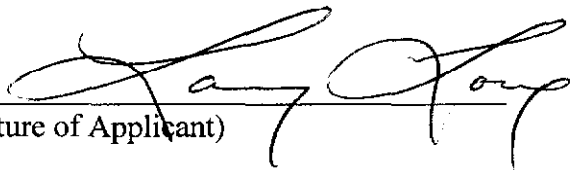
Please see Attachment A, appended hereto.

28. Will technical personnel be available at all times to assist customers with service problems?

X YES _____ NO

Customers may call toll-free during normal business hours at 1-800-936-5223 for assistance with service problems.

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? X N/A YES NO



(Signature of Applicant)

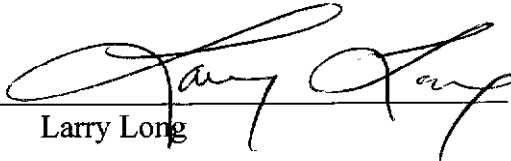
VERIFICATION

This application shall be verified under oath.

OATH

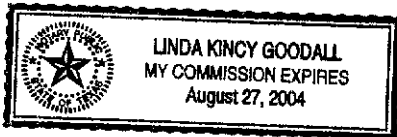
State of Texas)
County of Dallas)ss

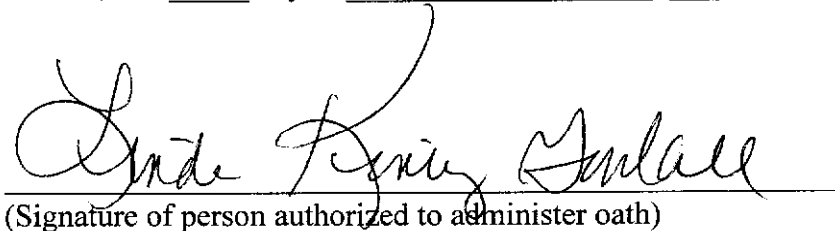
Larry Long makes oath and says that he is President of Comm South Companies, Inc., that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.


Larry Long

Subscribed and sworn to before me, a Notary Public/ Corporate Ofc. Mgr
(Title of person authorized to administer oaths)

in the State and County above named, this 4th day of October, 2000




(Signature of person authorized to administer oath)